



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Olympia, Washington 98504

RE: Kelly M. Bell  
Master Case No.: M2009-411  
Docket No.:  
Document: Statement of Charges

Regarding your request for information about the above-named practitioner, certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

The following information has been withheld:

The identity of the complainant if the person is a consumer, health care provider, or employee, pursuant to RCW 43.70.075 (Identity of Whistleblower Protected) and/or the identity of a patient, pursuant to RCW 70.02.020 (Medical Records - Health Care Information Access and Disclosure)

If you have any questions or need additional information regarding the information that was withheld, please contact:

Customer Service Center  
P.O. Box 47865  
Olympia, WA 98504-7865  
Phone: (360) 236-4700  
Fax: (360) 586-2171

You may appeal the decision to withhold any information by writing to the Deputy Secretary, Department of Health, P.O. Box 47890, Olympia, WA 98504-7890.

**STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
NURSING CARE QUALITY ASSURANCE COMMISSION**

**FILED**

**MAR 30 2009**

*Adjudicative Clerk*

In the Matter of

**KELLY M. BELL**

Credential No. ARNP.AP.30005937

Credential No. RN.RN.00075082

**Nos. M2009-410**

**M2009-411**

**STATEMENT OF CHARGES**

Respondent

The Health Services Consultant of the Nursing Care Quality Assurance Commission (Commission), on designation by the Commission, makes the allegations below, which are supported by the evidence contained in case nos. 2008-125966, 2008-125965, 2006-55519, 2007-60384 and 2007-60379. The patients referred to in this Statement of Charges are identified in the attached Confidential Schedule.

**1. ALLEGED FACTS**

1.1 On July 16, 2001, the state of Washington issued Respondent a credential to practice as an advanced registered nurse practitioner. Respondent's credential is currently active.

1.2 On October 16, 1981, the state of Washington issued Respondent a credential to practice as a registered nurse. Respondent's credential is currently active.

1.3 Respondent began providing care to Patient A on or about November 14, 2006. Patient A presented with multiple complaints during the course of her clinical relationship with Respondent, to include chronic, non-cancer pain and major depressive disorder.

1.4 During Respondent's treatment of Patient A, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to Patient A to treat Patient A's complaints of chronic, non-cancer pain. Respondent's treatment of Patient A's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.5 Respondent's treatment of Patient A's complaints of chronic, non-cancer pain placed Patient A at risk of serious physical harm or death.

ORIGINAL

1.6 Respondent began treating Patient B on or about February 15, 2006. Patient C had multiple diagnoses including major depressive disorder and chronic, non-cancer pain complaints.

1.7 During Respondent's treatment of Patient B, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed Patient C extremely high doses of opioids to treat Patient B's complaints of chronic, non-cancer pain. Respondent's treatment of Patient B's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.8 Respondent's treatment of Patient B's complaints of chronic, non-cancer pain placed Patient B at risk of serious physical harm or death.

1.9 Respondent began treating Patient C on or about July 26, 2006. Patient C had multiple diagnoses to include major depressive disorder and chronic, non-cancer pain complaints.

1.10 During Respondent's treatment of Patient C, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed Patient C extremely high doses of opioids to treat Patient C's complaints of chronic, non-cancer pain. Respondent's treatment of Patient C's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.11 Respondent's treatment of Patient C's complaints of chronic, non-cancer pain placed Patient C at risk of serious physical harm or death.

1.12 Respondent began treating Patient D on or about June 2, 2006. Patient D had multiple diagnoses to include depression and chronic, non-cancer pain complaints.

1.13 During Respondent's treatment of Patient D, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient D's complaints of chronic, non-cancer pain. Respondent's treatment of Patient D's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.14 Respondent's treatment of Patient D's complaints of chronic, non-cancer pain placed Patient D at risk of serious physical harm or death.

1.15 Respondent began treating Patient E on or about December 9, 2005. Patient E presented with multiple chronic, non-cancer pain complaints.

1.16 During Respondent's treatment of Patient E, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient E's complaints of chronic, non-cancer pain. Respondent's treatment of Patient E's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and reasonably competent registered nurse in the state of Washington.

1.17 Respondent's treatment of Patient E's complaints of chronic, non-cancer pain placed Patient E at risk of serious physical harm or death.

1.18 Respondent began treating Patient F on or about January 18, 2006. Patient F had chronic, non-cancer pain complaints attributable to fibromyalgia, as well as a delusional disorder.

1.19 During Respondent's treatment of Patient F, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient F's complaints of chronic, non-cancer pain. Respondent's treatment of Patient F's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and reasonably competent registered nurse in the state of Washington.

1.20 Respondent's treatment of Patient F's complaints of chronic, non-cancer pain placed Patient F at risk of serious physical harm or death.

1.21 Respondent began treating Patient G on or about September 29, 2006. Patient G presented with complaints of chronic, non-cancer pain.

1.22 During Respondent's treatment of Patient G, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient G's complaints of chronic, non-cancer pain. Respondent's treatment of Patient G's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and reasonably competent registered nurse in the state of Washington.

1.23 Respondent's treatment of Patient G's complaints of chronic, non-cancer pain placed Patient G at risk of serious physical harm or death.

1.24 Respondent began treating Patient H on or about February 15, 2006. Patient H presented with chronic, non-cancer pain complaints secondary to soft tissue injuries sustained in a motor vehicle collision.

1.25 During Respondent's treatment of Patient H, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient H's complaints of chronic, non-cancer pain. Respondent's treatment of Patient H's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.26 Respondent's treatment of Patient H's complaints of chronic, non-cancer pain placed Patient H at risk of serious physical harm or death.

1.27 Respondent began treating Patient I on or about December 16, 2005. Patient I presented with chronic, non-cancer pain complaints related to back and knee problems, as well as self reported fibromyalgia.

1.28 During Respondent's treatment of Patient I, without appropriate assessment or appropriate ongoing monitoring, Respondent prescribed extremely high doses of opioids to treat Patient I's complaints of chronic, non-cancer pain. Respondent's treatment of Patient I's chronic, non-cancer pain fell below the standard of a reasonably competent advanced registered nurse practitioner and a reasonably competent registered nurse in the state of Washington.

1.29 Respondent's treatment of Patient I's complaints of chronic, non-cancer pain placed Patient I at risk of serious physical harm or death.

### **ALLEGED VIOLATIONS**

2.1 Based on the Alleged Facts, Respondent has committed unprofessional conduct in violation of RCW 18.130.180(4).

**RCW 18.130.180 Unprofessional conduct.** The following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

...

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;

....

2.2 The above violation provides grounds for imposing sanctions under RCW 18.130.160.

### 3. NOTICE TO RESPONDENT

The charges in this document affect the public health, safety and welfare. The Health Services Consultant of the Commission directs that a notice be issued and served on Respondent as provided by law, giving Respondent the opportunity to defend against these charges. If Respondent fails to defend against these charges, Respondent shall be subject to discipline and the imposition of sanctions under Chapter 18.130 RCW.

DATED: MARCH 27, 2009

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
NURSING CARE QUALITY ASSURANCE  
COMMISSION

Mary Dale  
MARY DALE  
HEALTH SERVICES CONSULTANT

Susan L. Pierini  
SUSAN L. PIERINI, WSBA #17714  
ASSISTANT ATTORNEY GENERAL

## CONFIDENTIAL SCHEDULE

This information is confidential and is NOT to be released without the consent of the individual or individuals named below. RCW 42.56.240(1)

Patient A

Patient B

Patient C

Patient D

Patient E

Patient F

Patient G

Patient H

Patient I